

STATE OF NEW YORK, COUNTY OF BRONX

SS:

I, the undersigned, an attorney admitted to practice in the courts of New York State,

certification certify that the within  
by Attorney has been compared by me with the original and found to be a true and complete copy.  
Attorney's state that I am  
affirmation the attorney(s) of record for  
 action; I have read the foregoing  
 to my knowledge, except as to the matters therein  
 alleged to be on information and belief; and as to those matters I believe it to be true.  
 The reason this verification is made by me and not by

in the within  
 and know the contents thereof; the same is true

The grounds of my belief as to all matters not stated upon my own knowledge are as follows:  
 I affirm that the foregoing statements are true, under the penalties of perjury.

The name signed must be printed beneath

DATED:

STATE OF NEW YORK, COUNTY OF BRONX

SS:

I, the undersigned, being duly sworn, depose and say:

individual in the action; I have read the foregoing  
verification and know the contents thereof; the same is true to my own  
 knowledge, except as to the matters therein stated to be alleged on information and belief,  
 and as to those matters I believe it to be true.

X corporation the President of TWIN 161 CORP. (d/b/a BLIMPIE)  
verification

acorporation and a party in the within action; I have read the foregoing **VERIFIED ANSWER**  
 and know the contents thereof; the same is true to my knowledge, except as to the matters therein stated to be alleged upon information and belief;  
 and as to those matters I believe it to be true. This verification is made by me because the above party is a corporation and I am an officer thereof.

The grounds of my belief as to all matters not stated upon my own knowledge are as follows:

Sworn to before me on the 19 day of January, 2018

JOSEPH A. ALTMAN

The name signed must be printed beneath

REHAN KHAN

STATE OF NEW YORK, COUNTY OF BRONX

ss:

(if more than one box is checked - indicate after names type of service used)

I, the undersigned, being sworn, say, I am not a party to the action, am over 18 years of age and reside at

Qualified in Westchester County

The undersigned Attorney and Counselor-at-law, duly admitted to practice law in the Courts of the State of New York, affirms,  
 under the penalty of perjury that:

On 1/19/18 I served the within Verified Answer  
 X service by depositing a true copy thereof enclosed in a post-paid wrapper, in an official depository under the exclusive care and  
by mail custody of the U.S. Postal Service within the New York State addressed to

Personal by delivering a true copy of each personally to each person named below at the address indicated. I know  
service on each person served to be the person mentioned and described in said papers as a party therein.  
an individual

Service by by transmitting a copy to the following persons by FAX at the telephone number set forth after each name below  
electronic E-Mail address set forth after each name below, which was designated by the attorney for such purpose,  
means and by by depositing a true copy thereof enclosed in a post-paid wrapper, in an official depository under the exclusive care and custody  
 of the U.S. Postal Service within the New York State to the address set forth after each name.

Overnight by dispatching a copy by overnight delivery to each of the following persons at the last known address set forth after  
Delivery each name below.  
Service

Michael Fallace & Associates P.C.  
 60 E. 42 Street, Ste. 450  
 NY NY 10165

Jackson Lewis P.C.  
 58 South Service Rd. Ste 205  
 Melville NY 11747

Sworn to before me on

the 19 day of JAN 2018

Affirm on the  
 day of 2017

Joseph A. Altman  
 Notary Public, State of New York  
 No. 4805116  
 Qualified in Westchester County  
 Certificate Filed in Bronx County  
 Commission Expires July 31, 2018

the name signed must be printed beneath

Lorraine Martiny